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Employer					
Worksite location					
Meeting date:		Meeting start time:		Meeting end time:	
<b>Attendance</b> (M)anager (E)mployee					
<i>Examples:</i>		John Smith Mary Brown	M		M
			E		E
			M		M
			E		E
			M		M
			E		E
			M		M
			E		E
			M		M
			E		E

☐ Review minutes of our previous meeting dated \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ for corrections/approval.

☐ Progress report on last meeting's "To Do" list:

[illegible]



# SAFETY MEETING MINUTES

The record for this safety meeting must be kept for one year.

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☐ Review accident/near miss reports to determine if causes were identified and corrected

Meeting date:

Meeting start time:

Meeting end time:

☐ Suggested updates to our Accident Prevention Program

☐ Other

**To Do List:**

**Assigned to:**

**Due:**

Minutes written by

Meeting leader (signature)

Date next meeting

Start time

Location

☐ Additional attendance, members absent, guests (from front) or other notes: